COPY

Disclosure Report Cover

Amendment ☐ Yes ☒ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
Do not use this form to update information.

1. Committee Information

a. Full Name	c. ID Number
Dan Besse Committee	9C08C4
b. Mailing Address (include City, State and Zip Code)	**d. Date Filed**
P.O. Box 15306 Winston-Salem, NC 27113	10/26/2009
	e. Phone Number
	336-765-3091

2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2009	09/02/2009	10/19/2009	Gregory T. McGrath

6. Type of Committee (Check One)

- ☒ Candidate Campaign
- ☐ PAC
- ☐ Independent Expenditure
- ☐ Legal Expense Fund
- ☐ Party
- ☐ Referendum
- ☐ Joint Fundraiser

7. Type of Fund *(if applicable, check one)*

- ☐ Booster Fund
- ☐ Building Fund
- ☐ Other:

8. Number of Fundraisers this Report

0

9. Type of Report *(check only one type of report from one category)*

Municipal	State/County	Referendum
☐ Organizational	☐ Organizational	☐ Organizational
☐ Thirty-five day	Quarterly	☐ Pre-referendum
☐ Pre-primary	☐ First	☐ Final
☒ Pre-election	☐ Second	☐ Supplemental Final
☐ Pre-runoff	☐ Third	☐ Annual
Semi-annual	☐ Fourth	☐ Special
☐ Mid Year	Semi-annual	
☐ Year End	☐ Mid Year	**10. Special Report Name**
☐ Final	☐ Year End	
☐ Special	☐ Final	
	☐ Special	

11. Account Information

a. Financial Institution Full Name	
Wachovia Bank	
b. Purpose	**c. Account Code**
All Campaign Expenses	WBC
	d. Period Begin Balance
	$ 11,840.30

11. Account Information

a. Financial Institution Full Name	
b. Purpose	**c. Account Code**
	d. Period Begin Balance
	$

2009 OCT 26 PM 2:15

CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

Gregory T. McGrath	Gregory T. McGrath	10/26/2009
Printed Name of Signer	Signature of Appointed Treasurer	Date

FOR OFFICE USE ONLY

Date Received:	10/26/09	Employee:	Judy Speas	Delivery Method
Date Postmarked:		Employee:		☐ Normal Mail
Date Scanned:		Employee:		☐ Registered Mail
Date Data Entered:		Employee:		☑ Hand Delivered
				☐ Electronically Filed
				☐ Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.
You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Amendment ☐ Yes ☐ No

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)	2. Type of Report	3. ID Number
Dan Besse Committee	Pre-election	9C08C4

Start of Election Cycle: January 1, 2006		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		$ 11,840.30	$ 9436.10
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	$ 1260.00	$ 3155.00
6) Contributions from Individuals	(CRO-1210)	$ 2974.31	$ 10,034.93
7) Contributions from Political Party Committees	(CRO-1220)	$	$
8) Contributions from Other Political Committees	(CRO-1230)	$ 500.00	$ 3800.00
9) Loan Proceeds	(CRO-1410)	$	$ 2000.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	$	$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	$	$
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	$	$
11c) Outside Sources of Income	(CRO-1250)	$	$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	$	$
11e) Exempt Purchase Price Sales	(CRO-1265)	$	$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e)		$ 4734.31	$ 18,989.93
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	$ 12,979.91	$ 15,240.71
13b) Contributions to Candidates/Political Committees	(CRO-1310)	$	$ 3000.00
13c) Coordinated Party Expenditures	(CRO-1310)	$	$
14) Aggregated Non-Media Expenditures	(CRO-1315)	$	$
15) Loan Repayments	(CRO-1420)	$	$ 5000.00
16) Refunds/Reimbursements from the Committee	(CRO-1320)	$	$ 380.00
17) In-Kind Contributions	(CRO-1510)	$ 369.31	$ 1579.93
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		$ 13,349.22	$ 25,200.64
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		$ 3225.39	$ 3225.39
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	$ 2000.00	
22) Debts and Obligations owed by the Committee	(CRO-1610)	$	
23) Debts and Obligations owed to the Committee	(CRO-1620)	$	
24) Account Transfers Within the Committee	(CRO-1720)	$	
25) Administrative Support	(CRO-1710)	$	$
26) Forgiven Loans	(CRO-1440)	$	$
27) 48-Hour Notice Reports Sum	(CRO-2220)	$	$
28) Contributions to be Refunded	(CRO-1215)	$	$

Aggregated Contributions from Individuals

Page 1 of 2

Amendment ☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of $50 or less

1. Committee Full Name (and Fund if applicable)	2. ID Number
Dan Besse Committee	9C08C4

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	WBC	Check		09/03/2009	$ 50.00
☐ Add ☐ Remove	WBC	Check		09/03/2009	$ 50.00
☐ Add ☐ Remove	WBC	Check		09/03/2009	$ 50.00
☐ Add ☐ Remove	WBC	Check		09/03/2009	$ 50.00
☐ Add ☐ Remove	WBC	Check		09/03/2009	$ 25.00
☐ Add ☐ Remove	WBC	Check		09/03/2009	$ 25.00
☐ Add ☐ Remove	WBC	Check		09/03/2009	$ 50.00
☐ Add ☐ Remove	WBC	Check		09/02/2009	$ 50.00
☐ Add ☐ Remove	WBC	Check		09/03/2009	$ 25.00
☐ Add ☐ Remove	WBC	Check		09/03/2009	$ 25.00
☐ Add ☐ Remove	WBC	Check		09/03/2009	$ 30.00
☐ Add ☐ Remove	WBC	Check		09/03/2009	$ 25.00
☐ Add ☐ Remove	WBC	Check		09/05/2009	$ 30.00
☐ Add ☐ Remove	WBC	Check		09/02/2009	$ 25.00
☐ Add ☐ Remove	WBC	Check		09/02/2009	$ 50.00
☐ Add ☐ Remove	WBC	Check		09/25/2009	$ 25.00
☐ Add ☐ Remove	WBC	Check		09/19/2009	$ 12.50
☐ Add ☐ Remove	WBC	Check		09/19/2009	$ 12.50
☐ Add ☐ Remove	WBC	Check		09/16/2009	$ 50.00
☐ Add ☐ Remove	WBC	Check		09/16/2009	$ 50.00
☐ Add ☐ Remove	WBC	Check		09/16/2009	$ 25.00
☐ Add ☐ Remove	WBC	Check		09/16/2009	$ 25.00
☐ Add ☐ Remove	WBC	Check		09/10/2009	$ 50

4. Total only this Page	$ 810
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 1260

Aggregated Contributions from Individuals

Page 2 of 2

Amendment ☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of $50 or less

1. Committee Full Name (and Fund if applicable)	2. ID Number
Dan Besse Committee	9C08C4

3. Contributor Information

a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
☐ Add ☐ Remove	WBC	Check		09/14/2009	$ 25.00
☐ Add ☐ Remove	WBC	Check		09/05/2009	$ 25.00
☐ Add ☐ Remove	WBC	Check		09/05/2009	$ 25.00
☐ Add ☐ Remove	WBC	Check		09/05/2009	$ 20.00
☐ Add ☐ Remove	WBC	Check		09/04/2009	$ 30.00
☐ Add ☐ Remove	WBC	Check		09/02/2009	$ 50.00
☐ Add ☐ Remove	WBC	Check		09/02/2009	$ 50.00
☐ Add ☐ Remove	WBC	Check		10/09/2009	$ 50.00
☐ Add ☐ Remove	WBC	Check		10/09/2009	$ 50.00
☐ Add ☐ Remove	WBC	Check		09/03/2009	$ 30.00
☐ Add ☐ Remove	WBC	Check		10/9/2009	$ 35.00
☐ Add ☐ Remove	WBC	Check		10/16/2009	$ 35.00
☐ Add ☐ Remove	WBC	Check		09/03/2009	$ 25.00
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$
☐ Add ☐ Remove					$

4. Total only this Page	$ 450.00
5. Total of ALL CRO-1205 Pages *(This line must be on line 5 of Detailed Summary Page CRO-1100)*	$ 1260.00

Contributions from Individuals

Pg 1 of 7

Amendment ☐ Yes ☒ No

Use this form to report individual contributions over $50 or contributions under $50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
Dan Besse Committee	9C08C4

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
James Allen Joines 713 Surry Path Trail Winston-Salem, NC 27104	President	Winston-Salem Alliance		$ 1100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check		09/04/2009	$ 500.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Bradley Kelly 271 Garfield Ave. Pomona, CA 91767	Money Manager	Magnum Opus		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check		09/03/2009	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Roger N. Kirkman 2550 Bitting Rd. Winston-Salem, NC 27104	Webmaster	State of NC		$ 150.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check		09/03/2009	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 700.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 2974.31

Contributions from Individuals

Amendment ☐ Yes ☒ No

Use this form to report individual contributions over $50 or contributions under $50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
Dan Besse Committee	9C08C4

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Donna M. Schmid 720 Tam O Shanter Tr. Winston-Salem, NC 27103	Nurse Practioner	Senior Care PA		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check		09/02/2009	$ 50.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Herman E. Schmid 720 Tam O Shanter Tr. Winston-Salem, NC 27103	Physician	Senior Care PA		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check		09/02/2009	$ 50.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Frances Huffman 2400 Hoyt Street Winston-Salem NC 27103	Homemaker			$ 250.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check		09/03/2009	$ 50.00
☐					$
☐					$

4. Total only this Page	$ 150.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 2974.31

Contributions from Individuals

Amendment ☐ Yes ☒ No

Use this form to report individual contributions over $50 or contributions under $50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
Dan Besse Committee	9C08C4

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Paul C. Shepard 1034 Lockland Ave. Winston-Salem, NC 27103	Attorney	Self Employed		$ 80.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check		09/03/2009	$ 30.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Barry Boneno 1408 Hannaford Rd Winston-Salem, NC 27103	Business Owner	House of Plants		$ 400.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check		09/05/2009	$ 100
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
William G. Benton 1105 Brookstown Av. Winston-Salem, NC 27101	CEO	Salem Senior Housing		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check		09/16/2009	$ 100.00
☐					$
☐					$

4. Total only this Page	$ 230.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 2974.31

Contributions from Individuals

Amendment ☐ Yes ☒ No

Use this form to report individual contributions over $50 or contributions under $50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
Dan Besse Committee	9C08C4

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
William E. Holman 407 Dixie Trail Raleigh, NC 27607	Dir. of State Policy	Nicholas Institute/ Duke Univ.		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check		09/29/2009	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Claire Giffin 423 Plymouth Ave. Winston-Salem, NC 27104	Hair Stylist	Self Employed		$ 200.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check		09/09/2009	$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Peggy Besse 1026 16 Ave Place NW Hickory, NC 28601	Retired		Candidate's Mother	$ 700.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check		09/09/2009	$ 500.00
☐					$
☐					$

4. Total only this Page	$ 700.00
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 2974.31

Contributions from Individuals

Amendment ☐ Yes ☒ No

Use this form to report individual contributions over $50 or contributions under $50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
Dan Besse Committee	9C0BC4

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Jack H. Campbell Jr 1208 Brookstown Av. Winston-Salem, NC 27101	Consultant	H.R. Partners, Inc.		$ 596.59

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check		09/30/2009	$ 200.00
☐			Refreshments For Meet the candidate social	09/03/2009	$ 204.09
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Susan S. Campbell 1208 Brookstown Av. Winston-Salem, NC 27101	Home Maker			$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check		09/30/2009	$ 200.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Bert L. Bennett Jr PO Box 2736 Winston-Salem, NC 27102	Retired			$ 300.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check		10/07/2009	$ 300.00
☐					$
☐					$

4. Total only this Page	$ 904.09
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 2974.31

Contributions from Individuals

Amendment ☐ Yes ☒ No

Use this form to report individual contributions over $50 or contributions under $50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
Dan Besse Committee	9C08C4

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Ann Bennett-Phillips 1740 Chickasha Dr. Pfafftown, NC 27040	Vice President	Capitol Development Services		$ 100.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check			$ 100.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Eric S. Ellison 442 Wachovia St. Winston-Salem, NC 27101	Attorney	Self-Employed		$ 75.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check		09/30/2009	$ 75.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Patricia Sisson 1121 Fenimore St Winston-Salem, NC 27103	Retired			$ 35.60

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐			Refreshments for Neighborhood Meetings	09/23/2009	$ 35.60
☐					$
☐					$

4. Total only this Page	$ 210.60
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 2974.31

Contributions from Individuals

Amendment ☐ Yes ☒ No

Use this form to report individual contributions over $50 or contributions under $50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)	2. ID Number
Dan Besse Committee	9C08C4

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Christine Toole 109 Shadylawn Dr. Winston-Salem, NC 27104	Home Maker			$ 332.82

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐			Printing Expenses for Campaign Events	09/02/2009	$ 129.62
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
Marjorie Northrup 1308 Revere Rd. Winston-Salem, NC 27103	Retired			$ 80.00

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐	WBC	Check		09/03/2009	$ 50.00
☐					$
☐					$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Election Sum to Date
				$

f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
☐					$
☐					$
☐					$

4. Total only this Page	$ 79.62
5. Total of ALL CRO-1210 Pages *(This line must be on line 6 of Detailed Summary Page CRO-1100)*	$ 2974.31

Contributions from Other Political Committees

Pg 1 of 1

Amendment ☐ Yes ☒ No

Use this form to report contributions from other candidate, referendum or PAC committees

1. Committee Full Name (and Fund if applicable)	2. ID Number
Dan Besse Committee	9C08C4

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee	d. Comments
Molly Leight For City Council 313 S. Main St. Winston-Salem, NC 27101 336-725-4325	☒ Candidate ☐ PAC ☐ Referendum c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☒ Municipality:	e. Election Sum to Date $ 500.00

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
WBC	Check		09/21/2009	$ 500.00
				$
				$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee	d. Comments
	☐ Candidate ☐ PAC ☐ Referendum c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
				$
				$
				$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Committee	d. Comments
	☐ Candidate ☐ PAC ☐ Referendum c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $

f. Account Code	g. Form of Payment	h. In-Kind Description	i. Date (mm/dd/yyyy)	j. Amount
				$
				$
				$

4. Total only this Page	$ 500.00
5. Total of ALL CRO-1230 Pages *(This line must be on line 8 of Detailed Summary Page CRO-1100)*	$ 500.00

Disbursements

Pg 1 of 1

Amendment ☐ Yes ☒ No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)	2. ID Number
Dan Besse Committee	9C08C4

3. Type of Disbursement *(Please use separate CRO-1310 forms for each type of Disbursement.)*

☒ Operating Expenses ☐ Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
Alphagraphics 8100 North Point Blvd. Winston-Salem, NC 27105 336-759-8000	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☒ Municipality:	e. Election Sum to Date $ 385.10

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
WBC	Check	B	09/04/2009	$ 201.49	Printing Campaign Material
				$	

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
5 Star Campaigns, LLC 1840 Salem Bluff Dr. Winston-Salem, NC 27127 336-775-7877	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☒ Municipality:	e. Election Sum to Date $ 13,332.90

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
WBC	Check	B	09/23/2009	$ 8265.92	Printing and mailing postcards
WBC	Check	B	10/08/2009	$ 4512.50	Printing and mailing postcards

4. Payee Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Coordinated Committee Name	d. Comments
	c. Level Registered (Specify) ☐ Federal ☐ County: ☐ State ☐ Municipality:	e. Election Sum to Date $

f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				$	
				$	

5. Total only this Page	$ 12,979.91
6. Total of ALL CRO-1310 Pages *(This line goes in line 14a of Detailed Summary Page CRO-1100 if Operating Expenses)* *(This line goes in line 14b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)* *(This line goes in line 14c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)*	$ 12,979.91

7. Purpose Codes (List detailed expenditure code in (h.) above)

A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	O* - Other

* Codes require detailed explanation in required remarks field (k)

In-Kind Contributions

Pg 1 of 1 | Amendment ☐ Yes ☒ No

Use this form to report non-monetary contributions, donations, goods or services

1. Committee Full Name (and Fund if applicable)	2. ID Number
Dan Besse Committee	9C08C4

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Jack H. Campbell Jr. 1208 Brookstown Ave. Winston-Salem, NC 27101	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source		$ 296.59

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Refreshments for meet the candidate social	09/03/2009	$ 204.09
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Patricia Sisson 1121 Fenimore St. Winston-Salem, NC 27103	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source		$ 35.60

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Refreshments for neighborhood meetings	09/23/2009	$ 35.60
		$
		$

3. Contributor Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contributor	c. Comments	d. Election Sum to Date
Christine Toole 109 Shadylawn Dr. Winston-Salem, NC 27104	☒ Individual ☐ Candidate ☐ Party ☐ PAC ☐ Referendum ☐ Other Receipt Source		$ 332.82

e. Description	f. Date (mm/dd/yyyy)	g. Fair Market Amount
Printing expenses for campaign events	09/02/2009	$ 129.62
		$
		$

4. Total only this Page	$ 369.31
5. Total of ALL CRO-1510 Pages *(This line must be on line 16 of Detailed Summary Page CRO-1100)*	$ 369.31

Outstanding Loans

Pg 1 of 1

Amendment ☐ Yes ☒ No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)	2. ID Number
Dan Besse Committee	9C08C4

3. Lender Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Start Date (mm/dd/yyyy)	f. End Date (mm/dd/yyyy)
Dan Besse 1136 Miller St. Winston-Salem, NC 27103 336-722-1674	Attorney	Self Employed		12/31/2008	12/31/2009

g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		$ 2000 00	$ 2000 00

k. Full Name of Lending Institution	l. Loan Number

3. Lender Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Start Date (mm/dd/yyyy)	f. End Date (mm/dd/yyyy)

g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		$	$

k. Full Name of Lending Institution	l. Loan Number

3. Lender Information ☐ Add ☐ Remove

a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Job Title/Profession	c. Employer's Name/Specific Field	d. Comments	e. Start Date (mm/dd/yyyy)	f. End Date (mm/dd/yyyy)

g. Rate	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
%		$	$

k. Full Name of Lending Institution	l. Loan Number

4. Total only this Page	$ 2000 00
5. Total of ALL CRO-1430 Pages *(This line must be on line 21 of Detailed Summary Page CRO-1100)*	$ 2000 00